

Grundherren „als konfessionalisierende Obrigkeit“ in bikonfessionellen Gebieten. Deren Streben nach konfessioneller Homogenität war keineswegs so eindeutig und umfassend ausgeprägt, wie noch in der neueren Forschung angenommen wird. Deventer plädiert überzeugend für eine umfassende Kontextualisierung der jeweiligen Untersuchungsbeispiele, unter Einbeziehung „nichtkonfessioneller und überkonfessioneller Orientierungen und Handlungsweisen“ (S. 460).

Den Abschluss des Bandes bilden vier Beiträge, die sich mit Repräsentationsformen und der Rolle der Kunst bei der Darstellung ständischen, v. a. adeligen Selbstverständnisses beschäftigen. Friedrich Polleross fragt generell nach der „Repräsentation der Stände in Österreich vom 16. bis zum 18. Jahrhundert“ und unterstreicht beispielsweise die Bedeutung bildlicher Ergebnisbezeugungen nach der habsburgischen Gegenreformation und bei Huldigungsakten. Luc Duerloo („Discourse of Conquest, Discourse of Contract. Competing Visions on the Nature of Habsburg Rule in the Netherlands“) untersucht das Brüsseler Ständehaus und dessen bildkünstlerische Ausgestaltung. Andreas Kusternig bietet eine neue ikonographische Deutung des Hauptgemäldes im „Großen Saal“ des Niederösterreichischen Landhauses in Wien. Janet K. Page betritt Neuland, indem sie der Bedeutung der Musik für die Landstände im 18. Jahrhunderts nachgeht.

Der vorliegende, gut gegliederte, wenn auch leider registerlose Tagungsband verdient Beachtung weit über die engere Geschichte der Habsburgermonarchie hinaus. Er bietet mit breiter geographischer und zeitlicher Perspektive wichtige Anre-

gungen und erste Untersuchungsergebnisse zu den Strukturen, zur Selbst- bzw. Fremdwahrnehmung und zu den Repräsentationsformen der Stände in der frühneuzeitlichen Gesellschaft. Von den Herausgebern wurde zu Recht kein umfassender Rundumschlag angestrebt. Die vorgelegten Befunde gehen aber über erste „Anregungen“ (S. 40) weit hinaus und werden hoffentlich breite Rezeption und Fortsetzung erfahren.

Anmerkung:

- 1 P. Mat'á / T. Winkelbauer (Hrsg.), Die Habsburgermonarchie 1620 bis 1740. Leistungen und Grenzen des Absolutismusparadigmas (= Forschungen zur Geschichte und Kultur des östlichen Mitteleuropas, Bd. 24), Stuttgart 2006.

Waltraud Ernst/Thomas Mueller
(Hrsg.): **Transnational Psychiatries.**
Social and Cultural Histories of Psy-
chiatry in Comparative Perspective
c. 1800–2000, Newcastle upon Tyne:
Cambridge Scholars Publishing,
2010, 321 S.

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This is a very ambitious collection of essays. The volume breaks new ground in terms of geographical and chronological coverage. While each chapter is interesting, it seems essential to read the whole book to fully appreciate the aims of the project. These are carefully set out by the editors in a rather short but nonetheless

important introduction. Crucially, the focus on transnationalism develops as well as extends recent interest in international and multi-disciplinary approaches to the study of the history of psychiatry.¹ There is much here that is both new and likely to influence future work. Personally, I think that attempts to explore the 'relationship between the global and the local' (p. ix) offer a particularly promising research agenda. There is however a definite bias within the book towards the study of psychiatrists and psychiatric theory. Scholars concerned with the social history of medicine should be alert to, and possibly critical of, this orientation. While it is vitally important to consider the ideas that psychiatrists were reading, writing and talking about in their own professional circles, this was surely just one factor influencing patient care and the types of patients being brought forward for treatment. The most impressive contributions to this edited collection, for example Akihito Suzuki's examination of the adoption of shock therapies in Japanese psychiatry, are fully aware of this point. Indeed their analysis extends to 'the larger context in which the doctors, the patients (or clients), psychiatric and medical policies, and the medical market interacted with one another' (p. 141). This is an approach that usefully problematises the transfer (or not) of psychiatric treatments from one country to another. Such issues are perhaps most accessible in the chapters by Leckie, Eraso, Ernst, Suzuki, Hashimoto and Mueller which deal with institutional regimes as well as any transfer of practices on a local, national and international level.

While many of the non-medical actors historically active in the confinement of

the insane (especially local officials) are relatively neglected in this volume, the treatment of the relationship between allegedly insane persons, their family and psychiatrists does lead to some fascinating and even controversial conclusions. The case study offered by Fauvel is shown to be much more than just another incident in the anti-psychiatry movement. The international implications of this 'unique' case were significant, though its importance for a wider consideration of patient experiences lies more in mapping the potential for alliances between doctors and relatives to facilitate the forced confinement and/or treatment of alleged lunatics whose behaviour was a concern to their family, friends or neighbours. Such arrangements are shown by Leckie to have some relevance even under the unusual power-relations pertaining in colonial contexts. It is however Akihito Suzuki's Japanese case study that offers the most obvious example of intense, even extreme, psychiatric treatments being used on difficult rather than obviously dangerous individuals at the request of their families. The mistreatment of the insane is often explained with reference to their vulnerability on the margins of society so the idea that members of affluent families were targeted for physical therapies takes some understanding. Suzuki gives a very persuasive account of how evidence from Japan should be read. Limited contemporary evidence from the United Kingdom also suggests physical therapies were associated with what might be termed privileged status within any institutional population.² In other chapters communal as well as professional responses to the care and treatment of insane people are considered. Hashimoto and Mueller explore the influ-

ential Gheel model of family care in interesting but very different ways. Overall, the volume has a remarkable degree of coherence. It has clearly benefited from both the discussions that took place at the original conference held at Southampton University and input from the many scholars mentioned in the acknowledgements. Unusually for a new publication the notes appear at the bottom of each page rather than at the end of each chapter. This is both helpful to the reader and an explanation of why the chapters are different lengths. I was somewhat disappointed that the difficult but fascinating material covered by Isabelle von Buelzingsloewen was given so little space. The treatment of vulnerable groups in many societies at times of crisis, not just war, remains the subject of a fragmented historiography that allows the unhelpful persistence of sweeping generalisations based on partial and preliminary research. Her chapter is an important insight into a truly tragic episode. Yet its conclusions, and those offered by Eraso, are also relevant when evaluating current and future models of care. Since insane people seem especially vulnerable in situations where there is acute competition for resources, there is every reason to be concerned about maintaining and improving services in the current economic climate.

Many of the chapters offer a multi-layered analysis that uses detailed case studies to both ask and answer wider historical and methodological questions. This is my one reservation about the chapter by Wildgrube and colleagues, and to a lesser extent the one by Fussinger and Ohayon. While the quality of their analysis is often impressive I think they are conceived too narrowly. In the exploration of differ-

ent approaches to psychotherapy it would have been nice to see more attention paid to any benefits accruing to patients under either or both models. Perhaps more seriously, the decision to focus on descriptions of psychological trauma in different textbooks overlooks the problem that refining ideas about, and even diagnostic tools for, post-traumatic stress disorder (PTSD) has often left unresolved more fundamental questions about preventing, managing and alleviating the condition, even amongst high-risk groups such as war veterans. These issues clearly fall outside the scope of the volume, but the book is to be commended and will hopefully provoke much interest and debate as well as encouraging further research.

Notes

- 1 R. Porter/D. Wright (eds.), *The Confinement of the Insane. International Perspectives, 1800-1965*, Cambridge 2003; S. Mahone/M. Vaughan (eds.), *Psychiatry and Empire*, Basingstoke, 2007.
- 2 D. Pearce, *Family, Gender and Class in Psychiatric Patient Care During the 1930s. The 1930 Mental Treatment Act and the Devon Mental Hospital*, in P. Dale/J. Melling (eds.), *Mental Illness and Learning Disability since 1850. Finding a Place for Mental Disorder in the United Kingdom*, London, 2006, pp. 112-130.